SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
 Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	A. Signature X
1. Article Addressed to: Natrona County Commissioners c/o Ed Opella, Chair	D. Is delivery address different from item 1?
200 North Center Casper, WY 82601	3. Service Type Certified Mail Registered Return Receipt for Merchandise Insured Mail C.O.D.
2. Article Number	4. Restricted Delivery? (Extra Fee) Yes
(Transfer from service label) 7009	3410 0000 2596 9188
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